House of Representatives



General Assembly

File No. 100

January Session, 2005

Substitute House Bill No. 6648

House of Representatives, March 30, 2005

The Committee on Public Health reported through REP. SAYERS of the 60th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING EMERGENCY MEDICAL SERVICE ORGANIZATIONS AND PERSONNEL.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. (NEW) (*Effective October 1, 2005*) Any emergency medical

service organization, emergency medical technician, or paramedic

3 licensed or certified by the Department of Public Health who is

4 aggrieved by a decision of a sponsor hospital to terminate its

relationship with an emergency medical service organization may

6 appeal such decision to the Commissioner of Public Health not later

than fourteen days after written notice by the sponsor hospital to the

emergency medical service organization of such decision. The

9 Commissioner of Public Health shall adopt regulations, in accordance

with chapter 54 of the general statutes, to carry out the purposes of this

11 section. Such regulations shall include procedures for (1) a sponsor

12 hospital to notify an emergency medical service organization of its

13 decision to terminate its relationship with the organization, (2) an

14 emergency medical service organization to notify emergency medical

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15 technicians and paramedics employed by the organization of a sponsor 16 hospital's decision to terminate its relationship with the organization, 17 and (3) an emergency medical service organization, emergency 18 medical technician or paramedic to appeal a sponsor hospital's 19 decision to terminate its relationship with an emergency medical 20 service organization. For purposes of this section, "emergency medical 21 service organization" has the same meaning as provided in section 19a-22 175 of the general statutes, and "sponsor hospital" means a hospital 23 that has agreed to maintain staff for the provision of medical control, 24 supervision and direction to an emergency medical service 25 organization and its personnel and that has been approved for such 26 activity by the Office of Emergency Medical Services.

This act shall take effect as follows and shall amend the following sections:					
Section 1	October 1, 2005	New section			

PH Joint Favorable Subst.

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 06 \$	FY 07 \$
Public Health, Dept.	GF - Cost	44,160	56,750
UConn Health Ctr.	GF - Cost	Potential	Potential
Comptroller Misc. Accounts	GF - Cost	9,640	30,590
(Fringe Benefits)			

Note: GF=General Fund

Municipal Impact: None

Explanation

Passage of this bill will result in an FY 06 cost to the Department of Public Health of \$44,160. This includes \$42,560 to support the three-quarter year salaries of one half-time Administrative Hearings Attorney and one half-time clerical position, as well as \$1,600 for one-time equipment costs. Associated fringe benefit costs of \$9,640 would result.¹

These positions would be required to conduct hearings in cases involving appeals made by emergency medical services professionals and/or provider services. There are currently 19,200 certified or licensed EMS professionals in Connecticut and 381 EMS provider services (first responders/ambulance companies).

In FY 07, a departmental cost of \$56,750 would be incurred to reflect full year employment of the two half-time staff. These costs would be

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¹ The fringe benefit costs for state employees are budgeted centrally in the Miscellaneous Accounts administered by the Comptroller. The estimated fringe benefit reimbursement rate as a percentage of payroll is 53.91%, effective July 1, 2004. However, first year fringe benefit costs for new positions do not include pension costs lowering the rate to 22.65%. The state's pension contribution is based upon the prior year's certification by the actuary for the State Employees Retirement System.

supplemented by \$30,590 in fringe benefits costs.

The University of Connecticut Health Center (UCHC) may incur additional costs due to the passage of this bill. These costs would be from the allocation of staff and resources in any case where UCHC decisions are appealed to DPH. The number of such appeals involving UCHC, and therefore the potential cost, cannot be predicted in advance.

OLR Bill Analysis

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AN ACT CONCERNING EMERGENCY MEDICAL SERVICE ORGANIZATIONS AND PERSONNEL

SUMMARY:

This bill gives emergency medical service (EMS) organizations, emergency medical technicians (EMTs), and paramedics licensed or certified by the Department of Public Health (DPH) the right to appeal a sponsor hospital's decision to terminate its oversight relationship with the EMS organization to the public health commissioner. The appeal must be made within 14 days after the hospital's written notice of the termination decision to the EMS organization.

Under the bill, a "sponsor hospital" is one agreeing to maintain staff to provide medical control, supervision, and direction to an EMS organization and its personnel and that has been approved for such activity by the state Office of Emergency Medical Services. An EMS organization is a public, private, or voluntary organization offering transportation or treatment services to patients under emergency conditions. State regulations (the Public Health Code) require EMS organizations to have a sponsor hospital.

The bill requires DPH to adopt regulations including procedures for (1) a sponsor hospital to notify an EMS organization of its termination decision; (2) an EMS organization to notify EMTs and paramedics it employs of the termination; and (3) an EMS organization, EMT, or paramedic to appeal the termination.

EFFECTIVE DATE: October 1, 2005

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute Yea 23 Nay 0